



District of -

## **APPEARANCE**

CASE NUMBER:

To the Clerk of this court and all parties of record:

12/19/01

Enter my appearance as counsel in this case for

I certify that I am admitted to practice in this court.

Signature

FANK W. Anhim De 04716

Print Name Perferul Ablic Defender Number

Federal Miblic Veterser 401 Courthuse Sq.

Alexandria Va

State

Zip Code

703-299-3320

Fax Number

8

Date